

Renewal Application Information Sheet

Read the entire information sheet before completing the application. Keep a copy for your records.

Who is eligible to apply for scholarship renewal?

To be eligible you must:

- ◆ Be a current or former recipient of the American Indian Endowed Scholarship award.
- ◆ Continue to meet the minimum criteria, which includes:
 - Close social and cultural ties to an American Indian tribe and/or community in this state.
 - Agree to use your education to benefit other American Indians.
 - Have demonstrated financial need as determined by the college financial aid office.
 - Be a Washington state resident.
 - Be enrolled full-time at an eligible, in-state college or university as of fall term of the new award year.
 - Not be pursuing a degree in theology.
- ◆ Not have already received five years of this scholarship in total.

How do I apply for scholarship renewal?

- ◆ Complete the attached application form, and have your academic dean or advisor sign Section VII.
- ◆ Apply for state and federal need-based financial aid at the college or university you will attend during the next academic year. Financial aid applications are available at your school's student financial aid office, or online at www.fafsa.ed.gov.
- ◆ Attach an updated cumulative grade transcript for this academic year-to-date.
- ◆ Submit all materials to the Higher Education Coordinating Board as a single, complete package.

How will scholarship renewals be awarded?

Scholarship renewal is not automatic. Renewals, if any, are for one academic year and awarded on a competitive basis after a thorough review of an applicant's continued academic merit and commitment to return service to the state's American Indian community. In total, recipients are eligible for a maximum of five academic years of scholarship assistance through this program. Priority is given to upper division and graduate students. The program advisory committee decides the total number and value of scholarships awarded after analysis of the interest earnings received from the endowment. A recipient's award may not exceed his/her financial need as calculated by the school's student aid office. In some cases, the recipient's award may be adjusted to prevent conflict with the receipt of other student financial aid grants. Funds are disbursed once each term through the college. At the time of scholarship disbursement, the recipient must be enrolled as a **full-time student** at an eligible college or university within the state.

Applicant Checklist

This application form must be accompanied by:

- ☐ A copy of your most recent annual cumulative grade transcript. (Official transcripts, or a copy of your official transcripts).
- ☐ A signed release of information form (Section VI).
- ☐ The certification and signature of an institutional academic department head or advisor (Section VII).

***Your application must be postmarked no later than February 1.
Late or incomplete applications will not be considered.***

Mail the entire application in a single package (including all attachments) to:

**American Indian Endowed Scholarship Program
Higher Education Coordinating Board
917 Lakeridge Way SW / PO Box 43430
Olympia, WA 98504-3430**

For more information, please contact:

**Ann M. Voyles-Lee, Program Manager
(360) 753-7843
E-mail: annl@hecb.wa.gov or aies@hecb.wa.gov**

American Indian Endowed Scholarship Renewal Application

SECTION I: Applicant Information



I am applying for the school year
beginning fall _____.

1. Last Name		First Name		M.I.		2. Social Security Number	
3. Current Address:		Street	City	State	Zip	4. Phone ()	
5. Permanent Address (if different):		Street	City	State	Zip	6. Phone ()	
7. E-mail address:		8. Tribal Affiliation:				9. I am a Washington resident. Yes No	

SECTION II: Current Educational Plans

10. College you will attend beginning fall term:		11. Class level next fall (i.e., sophomore, junior, senior, graduate, doctoral, professional):	
12. Current course of study:		13. Date of expected program completion: Year Month	
14. Did your course of study change within the past year?		<input type="checkbox"/> No	<input type="checkbox"/> Yes (If yes, please elaborate below):
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SECTION III: Statement of Continued Intent to Return Service

15. Provide a brief statement describing your intent to provide service to the state's American Indian community. (Attach a separate sheet if necessary.)
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SECTION IV: Update of Extracurricular Activities

16. List current school, community, and leadership activities, if any, which would support your continued commitment to serve the state's American Indian community. (Attach a separate sheet if necessary.)
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SECTION V: Applicant Certification and Media Release

By my signature, I affirm that the information contained in this application is true and correct to the best of my knowledge. If I am selected to receive the scholarship, I understand that I must be enrolled full-time at an eligible college/university in the state by fall term of the award year.

I understand that the HECB may release information contained in this application to interested parties such as the news media and legislative personnel for the purpose of recognizing the accomplishments of scholarship recipients. ***I have checked the shaded box below only if I DO NOT wish this information to be released.****

***NO, I do NOT authorize the HECB to release my information for the purpose of recognition.** ☐

Applicant's Signature	Date
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(More on reverse)

American Indian Endowed Scholarship Renewal Application

SECTION VI: Release of Information Statement (to obtain institutional verifications)

American Indian Endowed Scholarship Program

All applicants must complete this Release of Information form. Financial need is one criterion used to determine eligibility for this award. The signed form will allow the school(s) to release financial aid, enrollment, and transcript information to the Higher Education Coordinating Board. The information will be used only to determine scholarship eligibility.

Applicant's Name (Please Print)

Applicant's Social Security Number

I authorize: _____ to release all necessary
(Name of School you will attend next fall term)
information about my schooling to assist the Higher Education Coordinating Board in their administration of the American Indian Endowed Scholarship program. This includes all demographic, enrollment, academic transcript, and student aid information.

Applicant's Signature

Date

SECTION VII: Certification by Institutional Academic Department Head or Advisor

1. To the best of my knowledge, _____ is pursuing a program of study that leads to a(n)
(Name of Student)
_____ degree/certificate in _____.
(type: AA, BA, BS, MA, MS, Ph.D., etc.) (field, program, or profession)

2. Is this student on-track to receive his/her degree/certificate by the expected completion date as noted on the first page of this application? ☐ Yes ☐ No (If "no," please explain):

3. Academic progress achieved by this student in his/her major area of study:
☐ EXCEEDS expectations ☐ MEETS expectations ☐ DOES NOT MEET expectations

4. Other comments: _____

Department Head or Advisor Signature

Name, Title, and Department (please type or print)

Name of Institution

Phone

Date

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Higher Education Coordinating Board
P. O. Box 43430
Olympia, WA 98504-3430

Questions?

Contact: Ann M. Voyles-Lee, Program Manager
Phone: (360) 753-7843; Fax (360) 704-6243
E-mail: annl@hecb.wa.gov
or: aies@hecb.wa.gov